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BSN 266 HESI Med Surg Practice V1 (New 2023/ 2024 Update) Questions and Verified Answers with Rationales|100% Correct| Grade A- Nightingale

QUESTION

A client has peripheral vascular disease (PVD) of the lower extremities. The client tells the nurse, "I've really tried to manage my condition well." Which of the following routines should the nurse evaluate as having been appropriate for this client?
1. Resting with the legs elevated above the level of the heart.
2. Walking slowly but steadily for 30 minutes twice a day.
3. Minimizing activity.
4. Wearing antiembolism stockings at all times when out of bed

Answer:
2

Slow, steady walking is a recommended activity for clients with peripheral vascular disease because it stimulates the development of collateral circulation. The client with PVD should not remain inactive. Elevating the legs above the heart or wearing antiembolism stockings is a strategy for alleviating venous congestion and may worsen peripheral arterial disease

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QUESTION

A client is scheduled for an arteriogram. The nurse should explain to the client that the arteriogram will confirm the diagnosis of occlusive arterial disease by:
1. Showing the location of the obstruction and the collateral circulation.
2. Scanning the affected extremity and identifying the areas of volume changes.
3. Using ultrasound to estimate the velocity changes in the blood vessels.
4. Determining how long the client can walk.

Answer:
1
An arteriogram involves injecting a radiopaque contrast agent directly into the vascular system to visualize the vessels. It usually involves computed tomographic

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scanning. The velocity of the blood flow can be estimated by duplex ultrasound. The client's ankle-brachial index is determined, and then the client is requested to walk. The normal response is little or no drop in ankle systolic pressure after exercise.

QUESTION

A client is scheduled to have an arteriogram. During the arteriogram, the client reports having nausea, tingling, and dyspnea. The nurse's immediate action should be to:
1. Administer epinephrine.
2. Inform the physician.
3. Administer oxygen.
4. Inform the client that the procedure is almost over.

Answer:
2

.Clients may have an immediate or a delayed reaction to the radiopaque dye. The physician should be notified immediately because the symptoms suggest an allergic reaction. Treatment may involve administering oxygen and epinephrine. Explaining that the procedure is over does not address the current symptoms

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QUESTION

Which of the following is an expected outcome when a client is receiving an IV administration of furosemide?
1. Increased blood pressure.
2. Increased urine output.
3. Decreased pain.
4. Decreased premature ventricular contractions.

Answer:
2

Furosemide is a loop diuretic that acts to increase urine output. Furosemide does not increase blood pressure, decrease pain, or decrease arrhythmias.

QUESTION

A client has had a pulmonary artery catheter inserted. In performing

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hemodynamic monitoring with the catheter, the nurse will wedge the catheter to gain information about which of the following?
1. Cardiac output.
2. Right atrial blood flow.
3. Left end-diastolic pressure.
4. Cardiac index

Answer:
3

When wedged, the catheter is "pointing" indirectly at the left end-diastolic pressure. The pulmonary artery wedge pressure is measured when the tip of the catheter is slowing inflated and allowed to wedge into a branch of the pulmonary artery. Once the balloon is wedged, the catheter reads the pressure in front of the balloon. During diastole, the mitral valve is open, reflecting left ventricular end diastolic pressure. Cardiac output is the amount of blood ejected by the heart in 1 minute and is determined through thermodilution and not wedge pressure. Cardiac index is calculated by dividing the client's cardiac output by the client's body surface area, and is considered a more accurate reflection of the individual client's cardiac output. Right atrial blood pressure is not measured with the pulmonary artery catheter.

QUESTION

After a myocardial infarction, the hospitalized client is taught to move the legs while resting in bed. The expected outcome of this exercise is to:
1. Prepare the client for ambulation.
2. Promote urinary and intestinal elimination.
3. Prevent thrombophlebitis and blood clot formation.
4. Decrease the likelihood of pressure ulcer formation.

Answer:
3

Encouraging the client to move the legs while in bed is a preventive strategy taught to all clients who are hospitalized and on bed rest to promote venous return. The muscular action aids in venous return and prevents venous stasis in the lower extremities. These exercises are not intended to prepare the client for ambulation. These exercises are not associated with promoting urinary and intestinal elimination. These exercises are not performed to decrease the risk of pressure ulcer formation

QUESTION

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Which of the following is the most appropriate diet for a client during the acute phase of myocardial infarction?
1. Liquids as desired.
2. Small, easily digested meals.
3. Three regular meals per day.
4. Nothing by mouth

Answer:
2

Recommended dietary principles in the acute phase of MI include avoiding large meals because small, easily digested foods are better tolerated. Fluids are given according to the client's needs, and sodium restrictions may be prescribed, especially for clients with manifestations of heart failure. Cholesterol restrictions may be prescribed as well. Clients are not prescribed diets of liquids only or restricted to nothing by mouth unless their condition is very unstable.

QUESTION

The nurse is caring for a client who recently experienced a myocardial infarction and has been started on clopidogrel (Plavix). The nurse should develop a teaching plan that includes which of the following points? Select all that apply.
1. The client should report unexpected bleeding or bleeding that lasts a long time.
2. The client should take Plavix with food.
3. The client may bruise more easily and may experience bleeding gums.
4. Plavix works by preventing platelets from sticking together and forming a clot.
5. The client should drink a glass of water after taking Plavix.

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Answer:
1,3,4

Plavix is generally well absorbed and may be taken with or without food; it should be taken at the same time every day and, while food may help prevent potential GI upset, food has no effect on absorption of the drug. Bleeding is the most common adverse effect of Plavix; the client must understand the importance of reporting any unexpected, prolonged, or excessive bleeding including blood in urine or stool. Increased bruising and bleeding gums are possible side effects of Plavix; the client should be aware of this possibility. Plavix is an antiplatelet agent used to prevent clot formation in clients that have experienced or are at risk for myocardial infarction, ischemic stroke, peripheral artery disease, or acute coronary syndrome. It is not necessary to drink a glass of water after taking Plavix.

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